

October 6, 2000

COMMEMORATE THE REDEDICATION OF THE ELMER JACKSON BRIDGE IN TOPEKA, KANSAS

HON. JIM RYUN

OF KANSAS

IN THE HOUSE OF REPRESENTATIVES

Friday, October 6, 2000

Mr. RYUN of Kansas. Mr. Speaker, I rise today to commemorate the rededication of the Elmer Jackson Bridge in Topeka, Kansas, to take place on October 21, 2000.

On June 15, 1920, in Duluth, Minnesota, three young black men were lynched by a mob numbering in the thousands. One of those men was Elmer Jackson, from Topeka, Kansas.

Leading newspapers throughout the North vilified the Duluthians for having stained their city's good name and castigated them for being evil, murderous racists. The governor of Minnesota, J.A.A. Burnquist commissioned his adjutant general to launch a formal investigation. Three dozen men were indicted for taking part in the mob action. And one year later, in reaction to the event, the state legislature enacted an anti-lynching law.

Michael Fedo, a former journalist, has written an account of the incident entitled the *Lynchings in Duluth*, based on newspaper accounts, court records and state files. The account of the lynchings shows that the mentality necessary for such events was not particular to any region.

Mr. Speaker, I rise today to commend Mr. Fedo and the various individuals and organizations involved in this effort for raising our consciousness by recognizing a painful time in our nation's history.

INTRODUCTORY STATEMENT FOR THE MILLENNIUM CANCER RESEARCH ACT

HON. DEBORAH PRYCE

OF OHIO

IN THE HOUSE OF REPRESENTATIVES

Friday, October 6, 2000

Ms. PRYCE of Ohio. Mr. Speaker, I rise today, along with my colleague Congresswoman LOIS CAPPS, to introduce the Millennium Cancer Research Act. This important legislation authorizes a five-year demonstration project designed to increase the flexibility, effectiveness and creativity of our nation's cancer research program. It has been developed in collaboration with the National Cancer Institute (NCI) and my colleagues in the Senate, in an effort to encourage high impact, cutting-edge research that will lead to future progress in the fight against cancer.

Mr. Speaker, each year millions of Americans are touched by cancer, as they or someone they know is struck by this terrible disease. We have made enormous strides in the war against this most formidable of opponents, but we must do more to accelerate success. As scientific breakthroughs occur and innovations happen, our nation's cancer laboratories must be able to build upon them and should not be hindered by red tape.

This legislation will allow for a restructuring of the National Cancer Institute that will help

EXTENSIONS OF REMARKS

to rid its scientific laboratories of redundancy and inefficiencies that slow progress in our ongoing battle against cancer. It will command accountability both to peers through mandatory reviews and to Congress through annual reporting requirements. This bill will provide the necessary flexibility to respond quickly to emerging research opportunities and to engage the brightest minds available while maintaining strict congressional oversight. It will allow NCI to streamline existing systems, maximize cost-effectiveness and more easily enter into strategic partnerships and collaborations in pursuit of a cure. In short, it puts in place an administrative structure that reflects the complex way in which research is conducted today.

Specifically, this legislation:

Directs the NCI Director to establish a program to encourage high-impact, high-risk rapid response research;

Provides NCI with authority similar to that given to the Defense Advanced Research Projects Agency (DARPA) to enter into multiparty agreements that recognize intellectual property rights as well as financial and in-kind contributions;

Allows NCI to create one simple and cost-effective personnel system to better recruit and manage priority research programs and initiatives;

Updates the dollar level for grants that must be reviewed by the National Cancer Advisory Board to \$300,000, in order to reflect inflation and the pace of science over the last 15 years; and

Requires the NCI Director to report annually to Congress on research initiatives advanced under this legislation and to the NIH Director on the potential benefits of expanding these activities to other Institutes.

Mr. Speaker, we are at a critical juncture in the war on cancer. By the year 2010, we face losing one-fourth of our citizens to this disease every year. At a time of such rapid growth and discovery in the world of medicine, we need to be as thoughtful in forming the institute that leads our nation into the battle against cancer as we are in choosing the science that will help us to win. This legislation will propel our nation toward that goal and I encourage support for this bill.

RYAN WHITE CARE ACT
AMENDMENTS OF 2000

SPEECH OF

HON. JUANITA MILLENDER-McDONALD

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

Thursday, October 5, 2000

Ms. MILLENDER-McDONALD. Mr. Speaker, I rise in strong support of the Ryan White CARE Act. AIDS is one of the cruelest diseases to strike this nation in recent history. Between 800,000 and 1 million Americans are currently infected with HIV and each day, an average of 100 people are diagnosed with AIDS.

The rate of HIV infection is growing at an even higher rate for minorities. Thirty to forty percent of all Americans with HIV are minorities. But when we break down these numbers,

we find that the rate of HIV transmission is spreading most rapidly to women and children. Of all women with AIDS, 76 percent are women of color and of all the children with AIDS, 82 percent are minorities.

Every year I lead a minority women and children AIDS Walk in California—the first of its kind in the country. I do so because in order for the Ryan White CARE Act to truly be effective, community leaders must play an integral role in bringing people together to raise awareness, educate individuals on HIV and AIDS, and build a network of support for families struggling with this disease. The Ryan White funding is crucial, but so is our activism. As leaders in each of our communities we have a duty to help raise awareness of critical issues such as AIDS, and to help our constituents obtain the education, counseling and treatment services they need.

The Ryan White CARE Act implements some valuable and necessary changes that will help more minorities in my district. Specifically it changes the formulas for distributing Title I grants to cities and Title II grants to states to consider the number of cases of HIV infection as well as the number of AIDS cases. Under current law, funds are distributed to cities and states on the basis of the number of AIDS cases alone when we all know that those with HIV are in dire need of these programs. The bill also modifies the current "hold-harmless" provision for cities receiving Title I grants. Under current law, if a city experiences a decline in its Title I formula allocation, its allocation is partially protected by a hold-harmless provision. Also under current law, no city could receive less than 95% of the amount it received in FY 1995; however, this bill changes the hold-harmless provisions so that cities will be protected from losing no more than 2% of their base-year allocation in the first year. The Ryan White CARE Act also establishes a Title II formula grant program for states with "emerging communities" in need of additional resources to combat HIV/AIDS. This supplemental program, which will help the emerging communities in my district, will be triggered when Title II appropriations exceed FY 2000 levels by \$20 million.

Finally, the Ryan White CARE Act increases the authorization for the grant program dealing with perinatal transmission of the HIV virus from its current level of \$10 million to \$30 million. It adds treatment services for pregnant women infected with HIV to the current list of activities, such as counseling, voluntary testing and outreach, that may be funded by these grants. This portion of the bill is particularly important to me as I have been extremely active in trying to secure funding for pilot programs here and abroad to prevent mother-to-child transmission.

I am proud of the bipartisan efforts devoted to this important legislation and know that the Ryan White CARE Act programs will continue to benefit thousands upon thousands of my constituents in need of assistance in my district. I urge my colleagues to join me in voting for this vital, and in many cases, life-saving legislation.

21843